and (m), 1905(p), (q) and (s), and 1920 of the Act

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Revision: HCFA-PM-91-4 OMB No.: 0938-(BPD) AUGUST1991 VIRGIN ISLANDS Territory: Citation Coverage and Conditions of Eligibility 42 CFR 436.10 Medicaid is available to the groups specified in ATTACHMENT 2.2-A. Mandatory categorically needy and other required special groups only. Mandatory categorically needy, other required special groups, and specified optional groups. / X/ Mandatory categorically needy, other required special groups, specified optional groups, and the medically needy. The conditions of eligibility that must be met are specified in ATTACHMENT 2.6-A. All applicable requirements of 42 CFR Part 436 1902(a)(10)(A) & (E), 1902(1) & (m), 1905(p) and (q) and 1920 of the and sections 1902(a)(10)(A)(i)(IV), (V), and (VI), 1902(a)(10)(A)(ii)(IX), 1902(a)(10)(E), 1902(1)

TN No. Supersedes TN No.

Act

Approval Date FEB 0 3 1992

are met.

Effective Date OCT 0 1 1991

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